

Fill in this information to identify your case and this filing:

Debtor 1	<u>Jamie</u>	<u>Allison</u>	<u>Welkis</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>1:20-bk-00076-HWV</u>		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.
 Yes. Where is the property?

1.1.

279 Redwood Court, Ramsey, NJ 07446
Purchase price 2007 \$410,000

Bergen

County

What is the property?

Check all that apply.

- Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Who has an interest in the property?

Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$379,900.00 \$379,900.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Owner _____

Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... →

\$379,900.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1.

Make: Mercedes
 Model: C300 AWD
 Year: 2015
 Approximate mileage: 56,875

Other information:

**2015 Mercedes C300 AWD (approx.
 56,875 miles)**

Who has an interest in the property?

Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**Current value of the portion you own?**

\$15,835.00

\$15,835.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

→ \$15,835.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe.....

2 beds, 3 dressers, 2 couches, loveseat, coffee table, end table, dining room table & chairs, china closet, stove, refrigerator, washer, dryer, microwave, desk, pots, pans, dishes, linens, miscellaneous household goods

\$1,280.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No
 Yes. Describe.....

2 televisions, DVD, 2 computers, cell phone, audio devices

\$1,800.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No
 Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....**Skis, scuba gear, exercise equipment, bicycle****\$750.00****10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....**Clothing****\$250.00****12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.....**2 gold necklaces, charms, costume jewelry****\$600.00****13. Non-farm animals**

Examples: Dogs, cats, birds, horses

 No Yes. Describe.....**4 cats****\$0.00****14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here..... →****\$4,680.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

 No Yes.....

Cash:

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

17.1. Checking account:	Checking account PNC	\$25.00
17.2. Savings account:	Savings account PNC	\$0.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific

information about

them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific

information about

them.....

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each

account separately. Type of account: Institution name:

Pension plan:	Pension plan Harrisburg School District	\$0.00
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22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No

Yes.....

Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific

information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them

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27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them

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Money or property owed to you?**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

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Federal: _____

State: _____

Local: _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information

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Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information

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31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

Term life through employerDaughter\$0.00**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

 No Yes. Give specific information

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33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....**See continuation page(s).****Unknown****34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**35. Any financial assets you did not already list** No Yes. Give specific information**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....****\$25.00****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe..**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe..**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade** No Yes. Describe..**41. Inventory** No Yes. Describe..

42. Interests in partnerships or joint ventures No Yes. Describe..... Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

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44. Any business-related property you did not already list No Yes. Give specific information.**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?** No. Go to Part 7. Yes. Go to line 47.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes....

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48. Crops--either growing or harvested No Yes. Give specific information.....

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49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No Yes....

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50. Farm and fishing supplies, chemicals, and feed No Yes....

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51. Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information.....

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52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... → \$379,900.00

56. Part 2: Total vehicles, line 5 \$15,835.00

57. Part 3: Total personal and household items, line 15 \$4,680.00

58. Part 4: Total financial assets, line 36 \$25.00

59. Part 5: Total business-related property, line 45 \$0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 \$0.00

62. Total personal property. Add lines 56 through 61..... \$20,540.00 Copy personal property total → \$20,540.00

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$400,440.00

Debtor 1 Jamie Allison Welkis Case number (if known) 1:20-bk-00076-HWV

33. Claims against third parties (details):

Claim of Debtor and daughter v ex husband for contribution to daughter's expenses \$22,500	<u>\$0.00</u>
Claim against mortgagee being litigated in Superior Court of New Jersey, Bergen County	<u>Unknown</u>

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Allison</u>	<u>Welkis</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>1:20-bk-00076-HWV</u>		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
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Brief description: \$379,900.00 \$0.00 **11 U.S.C. § 522(d)(5)**

279 Redwood Court, Ramsey, NJ 07446

Purchase price 2007 \$410,000

Line from *Schedule A/B*: 1.1

Copy the value from *Schedule A/B* *Check only one box for each exemption*

Brief description: \$15,835.00 \$0.00 **11 U.S.C. § 522(d)(2)**

2015 Mercedes C300 AWD (approx. 56,875 miles)

Line from *Schedule A/B*: 3.1

100% of fair market value, up to any applicable statutory limit

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from <i>Schedule A/B</i>
Brief description: 2 beds, 3 dressers, 2 couches, loveseat, coffee table, end table, dining room table & chairs, china closet, stove, refrigerator, washer, dryer, microwave, desk, pots, pans, dishes, linens, miscellaneous household goods	<u>\$1,280.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: 2 televisions, DVD, 2 computers, cell phone, audio devices	<u>\$1,800.00</u>	<input checked="" type="checkbox"/> \$1,800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>7</u>			
Brief description: Skis, scuba gear, exercise equipment, bicycle	<u>\$750.00</u>	<input checked="" type="checkbox"/> \$750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>9</u>			
Brief description: Clothing	<u>\$250.00</u>	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: 2 gold necklaces, charms, costume jewelry	<u>\$600.00</u>	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Line from <i>Schedule A/B</i> : <u>12</u>			
Brief description: 4 cats	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>13</u>			
Brief description: Checking account PNC	<u>\$25.00</u>	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.1</u>			
Brief description: Savings account PNC	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.2</u>			

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: Pension plan Harrisburg School District	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(10)(E)
Line from <i>Schedule A/B</i> : <u>21</u>			
Brief description: Term life through employer	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
Line from <i>Schedule A/B</i> : <u>31</u>			
Brief description: Claim of Debtor and daughter v ex husband for contribution to daughter's expenses \$22,500	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>33</u>			
Brief description: Claim against mortgagee being litigated in Superior Court of New Jersey, Bergen County	<u>Unknown</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>33</u>			

Fill in this information to identify your case:

Debtor 1	First Name <u>Jamie</u>	Middle Name <u>Allison</u>	Last Name <u>Welkis</u>
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>1:20-bk-00076-HWV</u>		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

<i>Column A</i>	<i>Column B</i>	<i>Column C</i>
<i>Amount of claim</i>	<i>Value of collateral that supports this claim</i>	<i>Unsecured portion</i>
		If any

2.1	Describe the property that secures the claim:	\$41,000.00	\$379,900.00	\$41,000.00
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BANK OF AMERICA

Creditor's name

BANKRUPTCY DEPARTMENT

Number Street

4161 PIEDMONT PARKWAY

Describe the property that secures the claim:

\$41,000.00

\$379,900.00

\$41,000.00

**279 Redwood Court, Ramsey,
NJ 07446**

GREENSBORO NC 27410
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset)

Check if this claim relates to a community debt

2nd Mortgage

Date debt was incurred 3/21/07 Last 4 digits of account number 7 4 4 6

Book 16636/731

Add the dollar value of your entries in Column A on this page. Write that number here:

\$41,000.00

Debtor 1 Jamie Allison Welkis Case number (if known) 1:20-bk-00076-HWV

Additional Page

Part 1: After listing any entries on this page, number them sequentially from the previous page.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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2.2 Describe the property that secures the claim: \$474,000.00 \$379,900.00 \$94,100.00

BANK OF AMERICA HOME LOANS

Creditor's name

CUSTOMER SERVICE

Number Street

PO BOX 5170

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

1st Mortgage

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred 3/21/2007

Last 4 digits of account number

7 1 5 4

2.3

Describe the property that secures the claim:

\$3,000.00 \$1,280.00 \$1,720.00

PROGRESSIVE LEASING

Creditor's name

256 WEST DATA DRIVE

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Lease/Purchase

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

2 3 8 0

Add the dollar value of your entries in Column A on this page. Write that number here:

\$477,000.00

Debtor 1 Jamie Allison WelkisCase number (if known) 1:20-bk-00076-HWV**Additional Page**

Part 1: After listing any entries on this page, number them sequentially from the previous page.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.4	Describe the property that secures the claim:	<u>\$337.59</u>	<u>\$379,900.00</u>	<u>\$337.59</u>
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RAMSEY BOARD OF PUBLIC WORK:

Creditor's name
33 N CENTRAL AVE
Number Street

2.4	Describe the property that secures the claim:	<u>\$337.59</u>	<u>\$379,900.00</u>	<u>\$337.59</u>
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**279 Redwood Court, Ramsey,
NJ 07446**

RAMSEY NJ 07446
City State ZIP Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Municipal Services

Date debt was incurred _____

Last 4 digits of account number

2 8 0 0

2.5	Describe the property that secures the claim:	<u>\$28,420.00</u>	<u>\$15,835.00</u>	<u>\$12,585.00</u>
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SANTANDER CONSUMER USA

Creditor's name
BANKRUPTCY DEPARTMENT
Number Street
PO BOX 560284

2.5	Describe the property that secures the claim:	<u>\$28,420.00</u>	<u>\$15,835.00</u>	<u>\$12,585.00</u>
-----	---	--------------------	--------------------	--------------------

**2015 Mercedes C300 AWD
(approx. 56,875 miles)**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Security Agreement

Date debt was incurred 11/2018

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$28,757.59

Debtor 1 Jamie Allison Welkis Case number (if known) 1:20-bk-00076-HWV

Additional Page

Part 1: After listing any entries on this page, number them sequentially from the previous page.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.6	Describe the property that secures the claim:	\$7,230.50	\$379,900.00	\$7,230.50
-----	---	------------	--------------	------------

TIMBER VALLEY AT RAMSEY COND
Creditor's name
ASSOCIATION INC
Number Street
HILLTOP ROAD

279 Redwood Court, Ramsey,
NJ 07446

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset)

Condo fees

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 6/24/19 Last 4 digits of account number 2 7 9 R

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,230.50

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$553,988.09

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

Debtor 1	First Name	Allison	Middle Name	Welkis	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA					
Case number (if known)	1:20-bk-00076-HWV				

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Priority Creditor's Name

Last 4 digits of account number

— — — —

Number Street

When was the debt incurred?

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Type of PRIORITY unsecured claim:

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

- Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify

Is the claim subject to offset?

- No
 Yes

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1	<p>AMERICAN HONDA FINANCE Nonpriority Creditor's Name NATIONAL RECOVERY CENTER Number Street POB 166469</p> <p>IRVING TX 75016 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Last 4 digits of account number 0 0 0 5 When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Repossession
		\$8,608.46

4.2	<p>ANDREW CACCIATORE Nonpriority Creditor's Name 589 VAN EMBURGH AVE Number Street</p> <p>TOWNSHIP OF WASHII NJ 07676 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Last 4 digits of account number _____ When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Marital Claims
		\$6,706.00

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3		\$664.93
BRIAN TRAVA DMD Nonpriority Creditor's Name <u>119 1ST STREET</u> Number Street		Last 4 digits of account number <u>0 8 4 0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
HO HO KUS NJ 07423 City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Dental
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
4.4		\$1,319.00
BRYANTS BK Nonpriority Creditor's Name <u>PO BOX 5161</u> Number Street		Last 4 digits of account number <u> 4/13 </u> When was the debt incurred? <u>4/13</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
SIOUX FALLS SD 57117 City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
4.5		\$55.00
CAPITAL ACCT Nonpriority Creditor's Name <u>PO BOX 140065</u> Number Street		Last 4 digits of account number <u> 7/19 </u> When was the debt incurred? <u>7/19</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
NASHVILLE TN 37214 City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for medical
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.6****\$577.07****CAPITAL ONE (BANKRUPTCY NOTIFICATION)**

Nonpriority Creditor's Name

PO BOX 30285

Number Street

Last 4 digits of account number 8 6 7 5When was the debt incurred? 9/10

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SALT LAKE CITY UT 84130-0285

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.7**\$2,227.85****CAPITAL ONE (BANKRUPTCY NOTIFICATION)**

Nonpriority Creditor's Name

PO BOX 30285

Number Street

Last 4 digits of account number 6 4 4 9When was the debt incurred? 2/12

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SALT LAKE CITY UT 84130-0285

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.8**\$315.00****CB INDIGO**

Nonpriority Creditor's Name

PO BOX 4499

Number Street

Last 4 digits of account number When was the debt incurred? 5/18

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

BEAVERTON OR 97076

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.9****\$550.00****CB/VICSCRT**

Nonpriority Creditor's Name

ATTN: BANKRUPTCY NOTICES

Number Street

PO BOX 182125**COLUMBUS OH 43218-2125**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 0 0 3 4When was the debt incurred? 2/18

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Charge Account**

4.10**\$1,998.00****CBNA/BEST BUY**

Nonpriority Creditor's Name

PO BOX 6497

Number Street

SIOUX FALLS SD 57117

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number When was the debt incurred? 12/16

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.11**\$236.00****CBNA/BEST BUY**

Nonpriority Creditor's Name

PO BOX 6497

Number Street

SIOUX FALLS SD 57117

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number When was the debt incurred? 11/10

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.12****\$1,988.55**

CITIBANK (SOUTH DAKOTA) NA
Nonpriority Creditor's Name
701 EAST 60TH STREET N
Number Street

Last 4 digits of account number 5 9 5 4

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SIOUX FALLS SD 57117
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.13**\$236.94**

CITIBANK (SOUTH DAKOTA) NA
Nonpriority Creditor's Name
701 EAST 60TH STREET N
Number Street

Last 4 digits of account number 7 0 7 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SIOUX FALLS SD 57117
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.14**\$4,166.00**

CITIBANK (SOUTH DAKOTA) NA
Nonpriority Creditor's Name
701 EAST 60TH STREET N
Number Street

Last 4 digits of account number 5 4 6 6

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SIOUX FALLS SD 57117
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.15****\$100.00****CLARA MAASS MEDICAL CENTER**

Nonpriority Creditor's Name

1 CLARA MAASS DRIVE

Number Street

Last 4 digits of account number 8 6 8 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

BELLEVILLE NJ 07109

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Account**

Is the claim subject to offset?

- No
- Yes

4.16**\$0.00****CONVERGENT OUTSOURCING INC**

Nonpriority Creditor's Name

800 SW 39TH STREET

Number Street

PO BOX 9004Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

RENTON WA 98057

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Collecting for Verizon**

Is the claim subject to offset?

- No
- Yes

4.17**\$986.09****CREDIT ONE BANK**

Nonpriority Creditor's Name

PO BOX 98873

Number Street

Last 4 digits of account number 9 2 8 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

LAS VEGAS NV 89193

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

Is the claim subject to offset?

- No
- Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.18****\$1,541.81****CREDIT ONE BANK**

Nonpriority Creditor's Name

PO BOX 98873

Number Street

Last 4 digits of account number 6 4 7 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

LAS VEGAS NV 89193

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.19**\$6,760.00****DALE KROUSE ESQ**

Nonpriority Creditor's Name

75 ESSEX STREET #220

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

HACKENSACK NJ 07601

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Legal fees**

4.20**\$100.00****DAVID B WATNER**

Nonpriority Creditor's Name

1129 BLOOMFIELD AVE STE 208

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

CALDWELL NJ 07006

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Account**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.21****\$100.00****DELAWARE RIVER JOINT TOLL COMMISSION** Last 4 digits of account number 7 3 8 8

Nonpriority Creditor's Name

ATT: TOLL ACCOUNTING

Number Street

PO BOX 4971

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

TRENTON NJ 08650

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Tolls**

4.22**\$994.00****FIRST PREMIER BANK**

Nonpriority Creditor's Name

3820 N LOUISE AVENUE

Number Street

Last 4 digits of account number 5 8 4 8When was the debt incurred? 9/14

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SIOUX FALLS SD 57104

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.23**\$1,365.00****FIRST PREMIER BANK**

Nonpriority Creditor's Name

3820 N LOUISE AVENUE

Number Street

Last 4 digits of account number 4 4 8 8When was the debt incurred? 7/13

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SIOUX FALLS SD 57104

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.24****\$315.74****GENESIS CREDIT**

Nonpriority Creditor's Name

BANKCARD SERVICES

Number Street

PO BOX 4499**BEAVERTON OR 97076-4499**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 6 7 5 1

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

4.25**\$1,800.00****GOLDEN VALLEY LENDING**

Nonpriority Creditor's Name

635 EAST HIGHWAY 20E

Number Street

UPPER LAKE CA 95485

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number When was the debt incurred? 5/1/18

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Loan

4.26**\$500.00****GREEN TRUST CASH LLC**

Nonpriority Creditor's Name

PO BOX 340

Number Street

HAYS MT 59527

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 7 9 5 0When was the debt incurred? 6/22/18

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Payday Loan

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.27****\$0.00**

GRiffin ALEXANDER PC
Nonpriority Creditor's Name
415 ROUTE 10 2ND FLOOR

Number Street

Last 4 digits of account number 2 7 9 K

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

RANDOLPH **NJ** **07869**
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for Timber Valley

4.28**\$1,497.64**

KAY JEWELERS
Nonpriority Creditor's Name
375 GHENT ROAD

Number Street

Last 4 digits of account number 1 5 9 4When was the debt incurred? 4/13

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

AKRON **OH** **44333**
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Charge Account

4.29**\$13,906.00**

LENDING CLUB
Nonpriority Creditor's Name
71 STEVENSON, STE 300

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2/17

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SAN FRANCISCO **CA** **94105**
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Unsecured

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.30****\$690.33****LIBERTY MUTUAL INSURANCE**

Nonpriority Creditor's Name

175 BERKELEY ST

Number Street

Last 4 digits of account number 2 3 7 0

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

BOSTON MA 02116

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Insurance

4.31**\$154.00****LINEBARGER & ASSOCIATES LLP**

Nonpriority Creditor's Name

PO BOX 708905

Number Street

Last 4 digits of account number 5 8 3 4

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SAN ANTONIO TX 78270

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for NYTLTWAL

4.32**\$975.00****MAX LEND**

Nonpriority Creditor's Name

PO BOX 639

Number Street

Last 4 digits of account number 7 1 0 9

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

PARSHALL ND 58770

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Loan

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.33****\$2,415.00****MERRICK BANK COURT NOTICES**

Nonpriority Creditor's Name

PO BOX 9201

Number Street

Last 4 digits of account number 2 4 6 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

OLD BETHPAGE NY 11804

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.34**\$447.26****MONEY LION**

Nonpriority Creditor's Name

PO BOX 1547

Number Street

Last 4 digits of account number

When was the debt incurred? 10/18

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SANDY UT 84091

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Installment sales**

4.35**\$500.00****MONEY LION**

Nonpriority Creditor's Name

PO BOX 1547

Number Street

Last 4 digits of account number 8 3 0 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SANDY UT 84091

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Loan**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.36****\$82.00****NEWARK BOARD OF EDUCATION**

Nonpriority Creditor's Name

EMPLOYEES CREDIT UNION

Number Street

195 NORMAN ROAD**NEWARK NJ 07106**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number

When was the debt incurred? 11/14

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Union**

4.37**\$10.00****NJ EZ PASS**

Nonpriority Creditor's Name

375 MCCARTER HWY (RT 21)

Number Street

NEWARK NJ 07114

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Account sent to collections**

4.38**\$100.00****NORTHWELL SIUH HEALTH**

Nonpriority Creditor's Name

475 SEAVIEW AVENUE

Number Street

STATEN ISLAND NY 10305

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number 0 6 5 9When was the debt incurred? 7/3/18

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Account**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.39****\$618.01****OLLD CARD SERVICES**

Nonpriority Creditor's Name

PO BOX 9222

Number Street

Last 4 digits of account number 6 4 9 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

OLD BETHPAGE NY 11804

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.40**\$2,795.00****ONEMAIN FINANCIAL ATTN: BK NOTICES**

Nonpriority Creditor's Name

PO BOX 1010

Number Street

Last 4 digits of account number When was the debt incurred? 8/15

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

EVANSVILLE IN 47706

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Loan**

4.41**\$100.00****OPTIMUM**

Nonpriority Creditor's Name

186 WEST MARKET STREET

Number Street

Last 4 digits of account number 5 0 4 1When was the debt incurred? 2018

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

NEWARK NJ 07103

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Cable/Internet**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.42****\$0.00****PCB INC**

Nonpriority Creditor's Name

PO BOX 9060

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

HICKSVILLE NY 11802

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting

4.43**\$100.00****PENNSYLVANIA TURNPIKE COMMISSION**

Nonpriority Creditor's Name

VIOLATION PROCESSING CENTER

Number Street

300 EAST PARK DRIVELast 4 digits of account number 5 9 7 6When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

HARRISBURG PA 17111

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Toll violations

4.44**\$1,953.00****PERFORMANCE FINANCE**

Nonpriority Creditor's Name

C/O WAYFINDER BK LLC

Number Street

PO BOX 64090

Last 4 digits of account number _____

When was the debt incurred? 5/18

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

TUCSON AZ 85728

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Repossession

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.45****\$100.00****PORT AUTHORITY NY/NJ**

Nonpriority Creditor's Name

PO BOX 15186

Number Street

Last 4 digits of account number 9 K T GWhen was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

ALBANY NY 12212
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Toll violations**

4.46**\$1,125.00****PSE&G CO**

Nonpriority Creditor's Name

CREDIT & COLLECTION CENTER

Number Street

PO BOX 490Last 4 digits of account number 4 7 0 0

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

CRANFORD NJ 07016-0490
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Utility bill past due**

4.47**\$2,185.84****ROCKLAND ELECTRIC**

Nonpriority Creditor's Name

390 W. ROUTE 59

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SPRING VALLEY NY 10977
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Electric service**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.48****\$1,319.93****SHOW MC**

Nonpriority Creditor's Name

PO BOX 852039

Number Street

Last 4 digits of account number 2 3 6 0

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

RICHARDSON TX 75085

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.49**\$760.61****SYNCB/AMAZON**

Nonpriority Creditor's Name

PO BOX 965015

Number Street

Last 4 digits of account number 3 7 6 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

ORLANDO FL 32896

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Charge Account**

4.50**\$687.92****SYNCB/BANANA**

Nonpriority Creditor's Name

PO BOX 965005

Number Street

Last 4 digits of account number 0 8 0 0

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

ORLANDO FL 32896

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Charge Account**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.51****\$1,505.14**

SYNCB/TJXDC
Nonpriority Creditor's Name
PO BOX 965060
Number Street

Last 4 digits of account number 6 7 1 5

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

ORLANDO FL 32896-5060
City State ZIP Code

Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

Is the claim subject to offset?

- No
 Yes

4.52**\$1,073.86**

SYNCB/WALMART
Nonpriority Creditor's Name
PO BOX 965024
Number Street

Last 4 digits of account number 5 1 5 1

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

ORLANDO FL 32896
City State ZIP Code

Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Charge Account

Is the claim subject to offset?

- No
 Yes

4.53**\$3,501.73**

SYNCHRONY BANK
Nonpriority Creditor's Name
C/O RECOVERY MANAGEMENT SYSTEMS CO
Number Street
25 SE 2ND AVE SUITE 1120

Last 4 digits of account number 2 3 7 8

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

MIAMI FL 33131
City State ZIP Code

Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

Is the claim subject to offset?

- No
 Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.54****\$488.46**

SYNCHRONY BANK E-CAST SETTLEMENT C Last 4 digits of account number 8 4 4 0
 Nonpriority Creditor's Name
PO BOX 29262

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

NEW YORK NY 10087
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.55**\$283.57**

TOTAL VISA Last 4 digits of account number 9 4 5 3
 Nonpriority Creditor's Name
BILLING ACCOUNT INQUIRIES

Number Street
PO BOX 91510

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SD 57109
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.56**\$268.99**

UNIVERSITY HOSPITAL Last 4 digits of account number _____
 Nonpriority Creditor's Name
PO BOX 3009

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

NJ 07105
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Account**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.57****\$975.00****VBS INBOX LOAN**

Nonpriority Creditor's Name

PO BOX 881

Number Street

Last 4 digits of account number 8 0 5 4When was the debt incurred? 7/25/18

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SANTA ROSA CA 95402

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Loan

4.58**\$1,154.35****VERIZON WIRELESS**

Nonpriority Creditor's Name

500 TECHNOLOGY DR, STE 550

Number Street

Last 4 digits of account number 5 0 6 5

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SAINT CHARLES MO 63304-2225

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Cell Phone

4.59**\$4,746.33****VW CREDIT INC**

Nonpriority Creditor's Name

PO BOX 829009

Number Street

Last 4 digits of account number 5 5 9 TWhen was the debt incurred? 4/17

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

DALLAS TX 75382-9009

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Repossession

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.60****\$0.00****WELLS FARGO DEALER SERVICES**

Nonpriority Creditor's Name

CORRESPONDENCE MAC T9017-026

Number Street

PO BOX 168048**IRVING TX 75016-8048**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Deficiency

4.61**\$1,181.00****WISPELWAY DENTAL**

Nonpriority Creditor's Name

841 FRANKLINE AVE STE 3

Number Street

FRANKLIN LAKES NJ 07417

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Medical Account

4.62**\$157.06****WYNDAM PROFESSIONALS**

Nonpriority Creditor's Name

380 MAIN ST PO BOX 1048

Number Street

SALEM NH 03079

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 6 3 3 1

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Insurance

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

ALLTRAN FINANCIAL, LP	On which entry in Part 1 or Part 2 did you list the original creditor?
Name BANKRKUPTY NOTICES	Line <u>4.17</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Number Street 5800 NORTH COURSE DRIVE	
Last 4 digits of account number _____	
HOUSTON TX 77072	(City State ZIP Code)
CONVERGENT OUTSOURCING INC	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 800 SW 39TH STREET	Line <u>4.58</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Number Street PO BOX 9004	
Last 4 digits of account number _____	
RENTON WA 98057	(City State ZIP Code)
CREDIT CONTROL LLC	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 4710 EISENHOWER BLVD A2	Line <u>4.10</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Number Street	
Last 4 digits of account number _____	
TAMPA FL 33634	(City State ZIP Code)
IC SYSTEM	On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO BOX 64378	Line <u>4.15</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Number Street	
Last 4 digits of account number _____	
SAINT PAUL MN 55164	(City State ZIP Code)
PORTFOLIO RECOVERY ASSOCIATES LLC	On which entry in Part 1 or Part 2 did you list the original creditor?
Name BK NOTICES	Line <u>4.53</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Number Street PO BOX 41067	
Last 4 digits of account number _____	
NORFOLK VA 23541	(City State ZIP Code)

Debtor 1 Jamie Allison Welkis Case number (if known) 1:20-bk-00076-HWV

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

PORTFOLIO RECOVERY ASSOCIATES LLC Name BK NOTICES Number Street PO BOX 41067	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.40</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
NORFOLK VA 23541 City State ZIP Code	Last 4 digits of account number _____
PORTFOLIO RECOVERY ASSOCIATES LLC Name BK NOTICES Number Street PO BOX 41067	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.40</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
NORFOLK VA 23541 City State ZIP Code	Last 4 digits of account number _____
PORTFOLIO RECOVERY ASSOCIATES LLC Name BK NOTICES Number Street PO BOX 41067	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.28</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
NORFOLK VA 23541 City State ZIP Code	Last 4 digits of account number _____
RADIUS GLOBAL SOLUTIONS LLC Name FDBA NORTHLAND GROUP LLC Number Street 50 W SKIPPACK PIKE	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.13</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
AMBLER PA 19002 City State ZIP Code	Last 4 digits of account number _____
RADIUS GLOBAL SOLUTIONS LLC Name FDBA NORTHLAND GROUP LLC Number Street 50 W SKIPPACK PIKE	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.12</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
AMBLER PA 19002 City State ZIP Code	Last 4 digits of account number _____
RETRIEVAL MASTERS CREDITORS BUREAU, INC. Name 4 WESTCHESTER PLAZA, STE 110 Number Street	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.37</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
ELMSFORD NY 10523 City State ZIP Code	Last 4 digits of account number _____

Debtor 1 Jamie Allison Welkis

Case number (if known) 1:20-bk-00076-HWV

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

RGS FINANCIAL

Name
PO BOX 852039
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.48 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

RICHARDSON TX 75085
City State ZIP Code

Last 4 digits of account number _____

SEQUIUM

Name
1130 NORTHCCHASE PKWY
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

MARIETTA GA 30067
City State ZIP Code

Last 4 digits of account number _____

VITAL RECOVERY SERVICES LLC

Name
PO BOX 923748
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.59 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

PEACHTREE CORNERS GA 30010
City State ZIP Code

Last 4 digits of account number _____

WELTMAN, WEINBERG & REIS

Name
323 W LAKESIDE AVE, STE 200
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

CLEVELAND OH 44113
City State ZIP Code

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	6d. <u>\$0.00</u>

	Total claim
Total claims from Part 2	
6f. Student loans	6f. <u>\$0.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$92,069.47</u>
6j. Total. Add lines 6f through 6i.	6j. <u>\$92,069.47</u>

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
	Jamie	Allison	Welkis
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)	1:20-bk-00076-HWV		

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
 No
 Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 No
 Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1	LEAH CACCIATORE	
	Name	
	279 REDWOOD COURT	
	Number	Street
	RAMSEY	
	City	NJ
		State
		07446
		ZIP Code

Schedule D, line **2.5**

Schedule E/F, line _____

Schedule G, line _____

SANTANDER CONSUMER USA

Fill in this information to identify your case:

Debtor 1	Jamie	Allison	Welkis
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)	1:20-bk-00076-HWV		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I**Schedule I: Your Income****12/15**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Teacher	
Employer's name	HARRISBURG SCHOOL DISTRICT	
Employer's address	ATTN: PAYROLL Number Street 1601 STATE STREET	
	City	State Zip Code
	HARRISBURG	PA 17103
	City	State Zip Code

How long employed there? 2 weeks**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$3,951.15</u>	
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$3,951.15</u>	

Copy line 4 here	→	For Debtor 1	For Debtor 2 or non-filing spouse
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$3,951.15	
5b. Mandatory contributions for retirement plans	5b.	\$638.93	
5c. Voluntary contributions for retirement plans	5c.	\$207.44	
5d. Required repayments of retirement fund loans	5d.	\$0.00	
5e. Insurance	5e.	\$0.00	
5f. Domestic support obligations	5f.	\$295.92	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: <u>See continuation sheet</u>	5h.+	\$186.05	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,328.34	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,622.81	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
8d. Unemployment compensation	8d.	\$0.00	
8e. Social Security	8e.	\$0.00	
8f. Other government assistance that you regularly receive			
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	
8h. Other monthly income. Specify: _____	8h.+	\$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,622.81	+ _____ = \$2,622.81
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		\$2,622.81	
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input type="checkbox"/> No.	When Debtor passes certification test, her income will increase to \$75,000 per year.		
<input checked="" type="checkbox"/> Yes. Explain: _____			

Debtor 1 Jamie Allison Welkis

Case number (if known) 1:20-bk-00076-HWV

5h. Other Payroll Deductions (details)

State
Unemployment
Local
LST

For Debtor 1	For Debtor 2 or non-filing spouse
<u>\$112.21</u>	<u> </u>
<u>\$2.36</u>	<u> </u>
<u>\$58.48</u>	<u> </u>
<u>\$13.00</u>	<u> </u>
Totals: <u>\$186.05</u>	<u> </u>

Fill in this information to identify your case:

Debtor 1	Jamie	Allison	Welkis
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)	1:20-bk-00076-HWV		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- No. Go to line 2.
 Yes. **Does Debtor 2 live in a separate household?**
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....**Dependent's relationship to Debtor 1 or Debtor 2****Dependent's age****Does dependent live with you?**

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence.

Include first mortgage payments and any rent for the ground or lot.

	<u>Your expenses</u>
4.	<u>\$375.00</u>
4a.	_____
4b.	_____
4c.	_____
4d.	_____

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Debtor 1 Jamie Allison WelkisCase number (if known) 1:20-bk-00076-HWVYour expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$75.00
6b. Water, sewer, garbage collection	6b.	\$75.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$90.00
6d. Other. Specify: <u>Cell</u>	6d.	\$55.00
7. Food and housekeeping supplies	7.	\$350.00
8. Childcare and children's education costs	8.	
9. Clothing, laundry, and dry cleaning	9.	\$50.00
10. Personal care products and services	10.	\$50.00
11. Medical and dental expenses	11.	\$20.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$450.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14. Charitable contributions and religious donations	14.	
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	
15b. Health insurance	15b.	
15c. Vehicle insurance	15c.	\$210.00
15d. Other insurance. Specify: _____	15d.	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	
17. Installment or lease payments:		
17a. Car payments for Vehicle 1 2015 Mercedes	17a.	\$723.00
17b. Car payments for Vehicle 2	17b.	
17c. Other. Specify: _____	17c.	
17d. Other. Specify: _____	17d.	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19. Other payments you make to support others who do not live with you. Specify: _____	19.	

Debtor 1 Jamie Allison Welkis

Case number (if known) 1:20-bk-00076-HWV

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

- | | |
|---|------------|
| 20a. Mortgages on other property | 20a. _____ |
| 20b. Real estate taxes | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses | 20d. _____ |
| 20e. Homeowner's association or condominium dues | 20e. _____ |

21. Other. Specify: _____

21. + _____

22. Calculate your monthly expenses.

- | | |
|---|--|
| 22a. Add lines 4 through 21. | 22a. \$2,523.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. _____ |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | 22c. \$2,523.00 |

23. Calculate your monthly net income.

- | | |
|---|--|
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$2,622.81 |
| 23b. Copy your monthly expenses from line 22c above. | 23b. - \$2,523.00 |
| 23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income. | 23c. \$99.81 |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:
None.

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u> First Name	<u>Allison</u> Middle Name	<u>Welkis</u> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>1:20-bk-00076-HWV</u>		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<u>\$379,900.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<u>\$20,540.00</u>
1c. Copy line 63, Total of all property on Schedule A/B.....	<u>\$400,440.00</u>

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<u>\$553,988.09</u>
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3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<u>\$0.00</u>
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3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<u>+ \$92,069.47</u>
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Your total liabilities **\$646,057.56**

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<u>\$2,622.81</u>
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5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<u>\$2,523.00</u>
---	-------------------

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.**\$614.51****9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:****Total claim****From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u> First Name	<u>Allison</u> Middle Name	<u>Welkis</u> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>1:20-bk-00076-HWV</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Jamie Allison Welkis
Jamie Allison Welkis, Debtor 1

X _____
Signature of Debtor 2

Date 01/21/2020
MM / DD / YYYY

Date _____
MM / DD / YYYY